	PATENT A	APPLICATIO Effect	N FEE DI	RD		10	0	43	930				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			37					ATE	FEE	OR	RATE	FEE	İ
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			3 7 minus 20=		. 17		X	 5 9=		OR	X\$18=	306	ou
INDEPENDENT CLAIMS			minus 3 =		2		-	42=		1 1	X84=		
ΜU	LTIPLE DEPEN	DENT CLAIM P					1			OR	A04=	168.	ρU
• Mahadiffaaanaa is aalamad is loos the same as a same a								40=		OR	+280=		ł
* If the difference in column 1 is less than zero, enter "0" in column 2								TAL		OR	TOTAL	1214	U
CLAIMS AS AMENDED - PART II (Do 1050 (Column 1) (Column 2) (Column 3)								IALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	والمراجع وا	CLAIMS REMAINING AFTER AMENDMENT	Property and the second se	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.37	Minus	**	37	= /	X	9=	,	OR	X\$18=		
	Independent	• 5	Minus	***	5	=/	X	42=		OR	X84=		İ
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								40=		OR	+280=		
								TOTAL		ام	TOTAL ADDIT, FEE		1
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDI	T. FEE	L		ADDII. FEE		1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***		=	×	42=		OR	X84=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000		
·								40= TOTAL		OR	+280= TOTAL	<u> </u>	Į
								T. FEE	<u> </u>	OR	ADDIT. FEE		┨
		(Column 1)			mn 2) ÆST	(Column 3)				•]
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE	!	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=-	X	42=			X84=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 		-	OR			1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	<u></u>	1
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE		4
		nber Previously Pa					er found in	the ap	propriate bo	x in co	lumn 1.		

Application or Docket Number